Corporation for NATIONAL & COMMUNITY SERVICE

Application Instructions

Training and Technical Assistance Cooperative Agreements

OMB Control #: 3045-0105
Expiration Date: 10-31-2014

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ATTACHMENTS

These Attachments are worksheets only. All information must be entered in eGrants.

IMPORTANT NOTICE

These application instructions conform to the Corporation for National and Community Service's (the Corporation's) online grant application system, eGrants. All Corporation funding announcements are posted on our web site www.cns.gov and at www.grants.gov.

Public Burden Statement: Public reporting burden for this collection of information is estimated to average 11.75 hours per submission, including reviewing instructions, gathering and maintaining the data needed, and completing the form. Comments on the burden or content of this instrument may be sent to the Corporation for National and Community Service, Attn: Amy Borgstrom, 1201 New York Avenue, NW, Washington, D.C. 20525. The Corporation informs people who may respond to this collection of information that they are not required to respond to the collection of information unless the OMB control number and expiration date displayed on page 1 are current and valid. (See 5 C.F.R. 1320.5(b)(2)(i).) OMB Control Number 3045-0105 Expiration Date 9/30/2011

Time Burden: The time required to complete this collection of information is estimated to average 11.75 hours per applicant.

Use of Information: The information collected constitutes an application to the Corporation for grant funding. The Corporation evaluates the application and makes funding decisions through the Corporation's grant review and selection process.

Effects of Non-Disclosure: Providing this information is voluntary; however, failure to provide the information would not allow the Corporation to assess the applicant's request for funding. In this case, it will not be possible to consider granting funds to the applicant.

Privacy Act: The Privacy Act of 1974 (5 U.S.C § 552a) requires that the following notice be provided to you: The information requested on the Application Instructions: Training and Technical Assistance Cooperative Agreements is collected pursuant to 42 U.S.C 12592 and 12615 of the National and Community Service Act of 1990 as amended, and 42 U.S.C. 4953 of the Domestic Volunteer Service Act of 1973 as amended. Purposes and Uses - The information requested is collected for the purposes of reviewing cooperative agreement applications and granting cooperative agreements. Routine Uses - Routine uses may include disclosure of the information to federal, state, or local agencies pursuant to lawfully authorized requests. In some programs, the information may also be provided to federal, state, and local law enforcement agencies to determine the existence of any prior criminal convictions. The information may also be provided to appropriate federal agencies and Department contractors that have a need to know the information for the purpose of assisting the Department's efforts to respond to a suspected or confirmed breach of the security or confidentiality
or information maintained in this system of records, and the information disclosed is relevant and unnecessary for the assistance. The information will not otherwise be disclosed to entities outside of AmeriCorps and the Corporation for National and Community Service without prior written permission. Effects of Nondisclosure - The information requested is mandatory in order to receive benefits.

Federal Funding Accountability and Transparency Act: If you receive an award, you will be required to report at www.FSRS.gov on all subawards over $25,000 and may be required to report on executive compensation for your organization and for your subgrantees. You must have the necessary systems in place to collect and report this information. See 2 C.F.R. Part 170 for more information and to determine how these requirements apply.

Universal Identifier: Applications must include a Dun and Bradstreet Data Universal Numbering System (DUNS) number and register with the Central Contractor's Registry (CCR). All grant recipients are required to maintain a valid registration, which must be renewed annually.

Application Instructions for Training & Technical Assistance Cooperative Agreements

A. Application Resources

To develop your application, you need to use these Application Instructions in conjunction with the Training and Technical Assistance Notice of Funding Availability (*Notice*), The *Notice* includes deadlines, eligibility requirements, submission requirements, and other information that change year-to-year for this grant program. These Application Instructions, used together with the Notice, will help you complete your application. You may access this information on our website, at: http://www.nationalservice.gov under "New Funding Opportunities" or at the Grants.gov website, http://www.grants.gov under "Find Grant Opportunities".

If there is any inconsistency between the *Notice,* and the Application Instructions, the order of precedence is as follows:

1. *Notice of Federal Funding Opportunity,* which takes precedence over the
2. Application Instructions.

B. Submitting Your Application in eGrants

The Corporation requires that all applicants submit applications electronically utilizing the Corporation's web-based application system, eGrants. Applicants need to establish an eGrants account by accessing this link: https://egrants.cns.gov/espan/main/login.jsp and selecting "Don't have an eGrants account? Create an Account" t begin the process of submitting your application online. Instructions on how to create an account are available a this website. If you need assistance with the eGrants system, contact the National Service Hotline at 888-677-78

We suggest you first prepare and save your application as a word processing document prior to inputting it into eGrants, then copy and paste the document into eGrants. Use only uppercase letters for all section headings and other information you would like to highlight in your narrative. Bold face, bullets, underlines, or other types of formatting, charts, diagrams, and tables will not copy into eGrants. Do not use any of these in your application.

In eGrants, before Starting Section I (or A?), you will need to:

- Start a new Grant Application by selecting "New" from your eGrants Home page.
- Select the appropriate Program Area (?), and click "Go".
- Select the appropriate eGrants NOFA (?)

Once you create an application, you will be allowed to edit as needed until you are ready to submit. ***Note***: When you want to return to a previously created application, it will now appear under ***View My Grants/Applicants*** in the status ***For Grantee Edit or Action***. Clicking on this option will allow you to re-enter your application. Do **not** use the ***New*** button again.

Your application consists of the following components in the order below. Please make sure to complete each section.

I. Applicant Information
II. Application Information
III. Narratives
IV. Documents
V. Budget
VI. Review, Authorize, and Submit
VII. Performance Measures
VIII. Survey on Ensuring Equal Opportunity for Applicants (Optional)

I. Applicant

In eGrants, complete the Applicant Info Section

- In the Program Info Section, select **New**
- If you are applying for the first time, enter your contact information into the fields that appear.
- Enter or select a Program Director and Program Website URL.

II. Application Information

Information entered in the Applicant Info, Application Info, and Budget sections will populate the SF 424 Facesheet. If you are submitting your application in hard copy, you will find the SF424 in attachment A.

In the Application Information Section enter:

- Requested project period start and end dates. You may not request a program start date earlier than October 1. The project period is three years.
- If you are delinquent on any federal debt.
- State Application Identifier: Enter N/A.
- State Single Point of Contact: This is pre-filled as "No, this is not applicable."
- For "Project Director" please enter the Executive Director or other authorizing executive who will certify the grant.
- Program Initiative field, select the category you are applying for (e.g., TTA-Special Initiatives or TTA-Performance Measurement and Evaluation) from the pull-down menu.
- The "Estimated Funds Requested" box will be populated automatically after you complete the budget.

III. Narrative (Narrative section)

Before you complete this section, carefully read the Training and Technical Assistance Notice of Funding Availability found at:
http://www.nationalservice.gov/for_organizations/funding/index.asp
The NOFA provides specific information that will help you to address the topics below.

Provide a well-designed strategy and basic operating plan that provides the framework for the life of the plan with a clear and compelling justification for awarding the requested funds. The narrative is applicable to a three-year project period for which you are requesting approval.

The Narrative includes:

a. Executive Summary (Maximum 500 characters[1]). Executive Summaries for all compliant applications will be published in the Corporation website following grant awards.
b. Summary of Accomplishments and Outcomes, if applicable (4,000 characters)
c. Training and Technical Assistance (T&TA) Strategy and Delivery Plan (28,000 characters)

d. Organizational Capacity (32,000 characters)
e. Budget/Cost Effectiveness (4,000 characters)
f. Other (n/a)

The following is a description of the content that should be included in these sections:

a. Executive Summary
Provide a concise overview of your proposal that summarizes your proposed training and technical assistance strategies for helping Corporation grantees achieve the goals of the NOFA category you have chosen. The maximum length for the Executive Summary is 500 characters (equal to approximately one paragraph, 12 pt font page. The Corporation will post these summaries on www.nationalservice.gov in the interest of transparency and open government.

b. Summary of Accomplishments and Outcomes
If your organization currently receives Corporation funds of any type or has received such funds within the last three years, provide a clear, concise description of the accomplishments and outcomes (e.g., changes in knowledge, skills or behaviors) you achieved in relation to your objectives during the past or current agreement period.

If your organization has not received Corporation funds, you may use this space to describe the accomplishments and outcomes you achieved in another project or agreement that describes experience you consider relevant to this application.

The maximum length for the Summary of Accomplishments and Outcomes is 4,000 characters (equal to approximately two double-spaced, 12 pt font pages).

c. Training and Technical Assistance Strategy and Delivery Plan
Provide a narrative that includes the following:

(1) A first-year workplan that presents your proposed best approach to achieving the goals of the category you have chosen. As an addendum, you should briefly summarize changes (if any) for years two through three.

For year one, you should select learning outcomes and deliverables appropriate to the NOFA category chosen and discuss the learning strategies (e.g., materials development, on-line course development, face-to-face training modules, peer clinics, coaching sessions via phone or e-mail, etc.) you are proposing in order to achieve those outcomes. Specifically, describe:

- the learning outcomes you will be addressing,

[1] Characters = all letters, punctuation, and spaces included in a document. One double-spaced, 12-point font page equals approximately 2,000 characters.

- how you will measure achievement of these outcomes,
- how you will apply the various learning strategies and activities you have chosen to achieve the outcomes,
- how you will use technology to support your learning strategies, and,
- as appropriate, how you might use strategies in conjunction with each other to achieve the outcomes.

(2) Indicate how you propose to maximize efficiencies across commonalities of national service audiences while, at the same time, accounting for specific differences in the needs of AmeriCorps, Senior Corps, Learn and Serve, VISTA, NCCC. and Social Innovation Fund.

(3) Provide a measurement approach for each learning strategy presented and elaborate on how you propose to regularly measure whether learning actually occurred. The Corporation is committed to accountability and to measuring the performance of all of its grantees, including training and technical assistance providers. Providers must identify the critical outcomes of their work based on the goals identified in the selected NOFA category, indicators of success in this work, and how achievement of learning goals can be judged or measured. The Corporation needs tangible information documenting the effectiveness and outcomes of provider activities towards the Corporation's business goals as articulated in the NOFA. (The Corporation may also require an independent assessment of provider performance.)

The Corporation may identify certain performance measures that will be applicable to all providers. Please refer to the NOFA for specific requirements on developing and submitting performance measures.

In this section of the narrative, applicants should present and discuss their approach and proposed strategy for identifying meaningful performance measures and gathering and analyzing the relevant performance data.

The maximum length for the Training and Technical Assistance Strategy and Delivery Plan section is 28,000 characters (equal to approximately 14 double-spaced, 12 pt font pages).

d. Organizational Capacity

Provide a narrative that describes:

(a) The organization's capacity to provide training and technical assistance services nationwide[2] and recent work similar to that being proposed;

(b) The organization's knowledge of and/or experience with national service programs;

(c) Names and contact information of three to five references who can comment on the work described above.

[2] The applicant should identify and demonstrate their geographic service delivery capacity. The Corporation assumes that most applicants have the capacity to provide services to all states and regions in the U.S. However, the Corporation reserves the right to select different providers for the same category or categories with demonstrably regional capacity and a compelling reason why this is advantageous over one national provider.

(d) A list of proposed staff (no more than ten) who will be primarily responsible for the proposed deliverables with their areas of expertise and relevant experience highlighted. (Note: key staff will be subject to Corporation approval)

(e) The organization's experience with using technology and social media to address learning goals.

The maximum length for the Organizational Capacity section is 32,000 characters (equal to approximately 16 double-spaced, 12 pt font pages).

e. Budget/Cost Effectiveness Narrative

Explain how the overall budget will cost effectively support the scope of training and technical assistance activities proposed in section c and submit cost factors used in developing the itemized budget.

f. Other

Does not apply at this time. Enter N/A in this field.

IV. Documents

In addition to your application submitted in eGrants, you are required to provide your federally-approved indirect cost agreement in hard copy or e-mail, as part of your application. After you have submitted the documents, change their status in eGrants from the default "Not Sent" to the applicable status ("Sent," "Not Applicable,"or"Already on File at CNCS").

Federally-approved Indirect Cost Agreement

Applicants that include a federally approved indirect cost rate amount in their budget must submit the approved indirect cost rate agreement to TTANofa@cns.gov at the same time they submit their application.

V. Budget Instructions

A. Match Requirements

Program requirements, including, requirements on match are in the NOFA. Not all TTA categories have a match requirement.

If a match is required, in Section III of the budget identify each match source separately. Include dollar amounts for cash match from private, state and local funds. Define all acronyms the first time they are used.

B. Preparing Your Budget

Your proposed budget should be sufficient to allow you to perform the tasks described in your narrative. Reviewers will consider the information you provide in this section in their assessment of the Cost-Effectiveness and Budget Adequacy selection criterion.

Follow the detailed budget instructions below to prepare your budget. We recommend that you prepare your budget in the same order as indicated in the Budget Worksheets in Attachments E and F.

eGrants will create the budget and the budget narrative automatically from the detailed budget information you enter. Once you have entered your budget information in eGrants you will be asked to validate your budget and eGrants will check your submission for errors.

As you prepare your budget:

- All the amounts you request must be defined for a particular purpose. Do not include miscellaneous, contingency, or other undefined budget amounts.
- Itemize each cost and present the basis for all calculations in the form of an equation.
- Do not include unallowable expenses, e.g., entertainment costs.
- Do not include fractional amounts (cents).

Please refer to the relevant OMB Circulars on allowable costs for further guidance. The OMB circulars are online at www.whitehouse.gov/OMB/circulars.

- A-21 - Cost Principles for Educational Institutions, 2 CFR 220
- A-87 - Cost Principles for State, Local, and Indian Tribal Governments, 2 CFR 225
- A-122 - Cost Principles for Non Profit Organizations, 2 CFR 230

Programs must comply with all applicable federal laws, regulations, and OMB circulars for grant management, allowable costs, and audits, including providing audits to the A-133 clearinghouse if expending over $500,000 in federal funds, as required in OMB Circular A-133.

a. Project Personnel Expenses – Proposed staff, including the titles of staff, number of positions, annual salaries, and total costs. Under "Position/Title Description," list each staff position separately and provide salary and percentage of effort as percentage of FTE devoted to this agreement. Each staff person's role listed in the budget must be described in the application narrative and each staff person mentioned in the narrative must be listed in the budget as either Corporation or Grantee share.

b. Personnel Fringe Benefits – Proposed personnel fringe benefits. Under "Purpose/Description," identify the types of fringe benefits to be covered and the costs of benefit(s) for each staff position. Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401(k). You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If a fringe benefit amount is over 30%, please list separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item.

c. Travel – Proposed travel descriptions and calculations. Describe the purpose for which program staff will travel. Provide a calculation that includes itemized costs for airfare, transportation, lodging, per diem, and other travel-related expenses multiplied by the number of trips/staff. Where applicable, identify the current standard reimbursement rate(s) of the organization for mileage, daily per diem, and similar supporting information. The standard mileage reimbursement should not exceed the federal mileage rate unless a result of applicant policy and justified in the budget narrative. Only domestic travel is allowable.

d. Equipment – Proposed equipment needed to operate the project when cost of a single item is equal to or exceeds $5,000. Equipment is defined as tangible, non-expendable personal property having a useful life of more than one year AND an acquisition cost of **$5,000 or more per unit** (including accessories, attachments, and modifications). Any items that do not meet this definition should be entered in E. Supplies below. Purchases of equipment are limited to 10% of the total Corporation funds requested. If applicable, show the unit cost and number of units you are requesting. Provide a brief justification for the purchase of the equipment under Item/Purpose.

e. **Supplies** – Description and cost estimates of the expendable supplies proposed for the agreement. Include any related equipment that costs less than $5,000. Include the amount of funds to purchase consumable supplies and materials. You must individually list any single item costing $1,000 or more.**f.** **Contractual and Consultant Services** – Description and cost estimates of the contractual and consultant services proposed. Services of this type, when operational, must be documented in a contract. Payments to individuals for consultant services under this agreement should not exceed $750 per day (excluding costs for travel, supplies, etc.). The $750 daily rate is a ceiling, and we anticipate budgeted daily rates at considerably lower levels. Indicate the daily rate, number of days, and total cost for consultants you are proposing to use and their contractual services.

i. **Other Support Costs** – Other support costs not previously identified, such as communications (printing, phone calls, etc).

j. **Indirect Costs** – Indirect costs assigned to this work, consistant with your federally approved indirect cost agreement

VI. Review, Authorize, and Submit (Authorize and submit section)

Read the authorization, assurances, and certifications carefully. Complete each section of the Authorize and Submit section. See Appendix A # 17 and Appendix B. eGrants requires that you review and verify your entire application before submitting, by completing the following sections in eGrants:

- ☐ Review
- ☐ Authorize
- ☐ Assurances
- ☐ Certifications
- ☐ Verify
- ☐ Submit

Authorization, Assurances and Certifications

Read the Authorization, Assurances, and Certifications carefully. The person who authorizes the application must be the applicant's Authorized Representative or his/her designee and must have an active eGrants account to sign these documents electronically. An Authorized Representative is the person in your organization authorized to accept and commit funds on behalf of the organization. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

Be sure to check your entire application to ensure that there are no errors before submitting it. eGrants will also generate a list of errors if there are sections that need to be corrected prior to submission when you verify the application. If someone else is acting in the role of the applicant's authorized representative, that person must log into his/her eGrants account and proceed with Authorize and Submit. After signing off on the Authorization, Assurances, and Certifications, his/her name will override any previous signatory that may appear and show on the application as the Authorized Representative.

Note: Anyone within your organization that will be entering information in the application at any point during application preparation and submission in the eGrants system must have their own eGrants account. Individuals may establish an eGrants account by accessing this link: https://egrants.cns.gov/espan/main/login.jsp and selecting "Don't have an eGrants account? Create an account."

VII. Survey on Ensuring Equal Opportunity for Applicants (Optional)

The Corporation and other federal agencies are collaborating with the White House Office of Faith-Based and Community Initiatives to conduct a survey of organizations that apply for federal funding. The purpose of this voluntary information collection is to compile statistics on the types of organizations that apply to the Corporation for funds, such as number of employees, budget size, and self-identification as a faith-based/religious organization or a non-religious community-based organization.

This form is for applicants that are nonprofit private organizations, **not including private universities.** All information from the attached survey will be confidential and the responses will be aggregated in a summary report. Information provided on your form will not be released and will not be considered in any way in making funding decisions. If you are submitting a hard copy application, the form can be found as an attachment..

You may complete the survey while preparing your application or after submitting your application.

1. To complete the survey while preparing your application, go to the Main Menu, select Enter Survey on Ensuring Equal Opportunity, provide requested information and submit.
2. If you submit your grant application without completing the survey, a pop-up box will appear and ask you if you would like to complete the survey. You may select Yes, No, or Remind Me Later. If you select Remind Me Later, you will be asked to fill in the survey next time you attempt to submit an application to the Corporation for National and Community Service.

C. Selection Criteria

The Corporation will assess applications based on the criteria listed below. The weight of criteria may vary from NOFA to NOFA and will be addressed in the document.

1. **Program Design**
   The Corporation will consider the quality of the proposed design based on:
   (a) the soundness, relevance and creativity of the applicant's overall strategy, including relevant research base, as appropriate;
   (b) the applicant's identification of learning outcomes associated with the category chosen and appropriate learning strategies to achieve them;
   (c) the applicant's approach to measuring achievement of learning outcomes and how data collected will be used to modify and improve strategies, products and services;
   (d) the applicant's approach to using technology as a teaching tool;
   (e) the applicant's demonstrated application of adult learning principles and techniques in its strategies and activities;
   (f) the applicant's proposed strategy to address both the commonalities and differences among Corporation programs.

2. **Organizational Capacity and Personnel**
   The Corporation will consider the capacity of the applicant to deliver the proposed services based on:
   (a) demonstrated ability to manage a federal grant or apply sound fiscal management principles to grants, as evidenced by previous grants experience;
   (b) demonstrated ability of staff and consultants to conduct the proposed activities and deliver high-quality adult training and technical assistance in the category chosen, as evidenced by education and past experience relevant to the programs to be served;
   (c) demonstrated ability to provide training and technical assistance services nationwide as evidenced by proposed plans for staffing, partnerships, and technology and by previous experience relevant to the programs to be served.

3. **Budget**
   The Corporation will consider the budget based on:
   (a) Cost-effectiveness of the proposed training and technical assistance activities in relation to the scope of the services proposed (i.e., the number of participants and proposed activities); and cost factors.
   (b) The clarity and thoroughness of the budget and budget narrative.

D. Reporting Requirements for Applicants Selected for Awards

Applicants who are selected for awards and enter into a cooperative agreement with the Corporation will be subject to the following planning, reporting and data submission requirements:

1. Financial Management Systems

Applicants selected for funding must provide documentation demonstrating that the applicant's financial management system complies with the requirements in the applicable regulations at US C.F.R. 2541.200 and 2 C.F.R.215.21. Consistent with the requirements of the Single Audit Act Amendments of 1996 (31 U.S.C. 7501-07), if the applicant expended $500,000 or more in federal awards in its most recent fiscal year, such documentation must include a certification from or most recent audit by the applicants independent public accountant that the applicant maintains internal controls over federal awards, complies with applicable laws, regulations and contract or grant provisions, and prepares appropriate financial statements. When requested, the applicant will have at least 30 calendar days to respond to this requirement. If an applicant does not respond within the prescribed time or responds with insufficient documentation, then the Corporation may determine that the applicant has not met this requirement and may withdraw the grant.

2. Planning and Progress Reports

a. Planning documents Budget and Performance Measurement Report (BPMR)
Budget projections for the upcoming budget period, showing projected training and technical assistance activities, numbers of participants, types of social media etc.

b. Progress reports
A semi-annual progress report is due thirty days after completion of the six-month period. The report will include:

i. Narrative analysis of the budget report, explaining the variance between planned and actual activities and costs by funding source..

ii. Evidence of any learning that actually occurred or return on investment for the training cost.

iii. Analysis of client feedback with aggregations of training-participant evaluations.

iv. Analysis of issues related to grantee performance and recommendations regarding the need for TTA.

v. Discussion of any problems observed or experienced and recommended solutions.

vi. List of upcoming activities and events with dates and locations.

c. A semi-annual Budget and Performance Measurement Report (BPMR) with actual data is due thirty days after completion of the six-month period. The report will include:

i. Activity report for the completed budget period, by funding source (e.g. AmeriCorps VISTA, J), showing actual training and technical assistance activities accomplished, numbers of participants, and supporting budget information.

ii. Aggregations of training-participant evaluations by program (e.g. AmeriCorps State & National, AmeriCorps VISTA, Senior Corps, CNCS Staff).

2. Financial Reports

Federal Financial Reports (FFRs) must be submitted semi-annually and must include a summary of expenditures for the period. The reports are cumulative and must be submitted on the Corporation's web-based grants management system, eGrants.

3. Final Reports

In lieu of the last semi-annual FFR, a final FFR must also be submitted that is cumulative over the entire award. The final FFR is also due 90 days after the end of the agreement.

4. Other data-collection requirements

The provider must:

a. Submit copies of all curricula, handouts, and other materials developed to their cognizant training officer.

b. Meet as necessary with their cognizant training officer, or other staff or consultants designated by the cognizant training officer, to review work plans and budgets, monitor progress, and exchange ideas and information concerning training and technical assistance.

c. Keep current the listing of upcoming activities with dates and locations posted on the Corporation's Master Training Calendar.

d. Submit such special reports as may be reasonably requested by the Corporation.

E. Continuation Requests

The following instructions for submitting a continuation request apply only to grantees that are currently in their first or second year of operation within a three-year grant cycle. If your cooperative agreement is currently in the final year of its grant cycle, you must apply using the application instructions for new applications.

When to Submit Your Continuation Request:
The date for the submission of continuation requests is **September 15** at **5:00 p.m. Eastern Time.**

How to Submit Your Continuation Request:

- Submit your continuation request in eGrants.
- To create your continuation request in eGrants, click **Continuation/Renewal** on your eGrants home page. You will be shown a list of grants that are eligible to be continued. Select the grant you wish to continue. **Make sure you select the correct one. Do not start a new application.** The system will copy your most recently awarded application.
- Edit your continuation application as directed in the continuation request instructions below. When you have completed your work, click the **SUBMIT** button.

Be sure you also review the *Notice* when preparing your request. If you have questions about the content of your continuation request, please contact your Training Officer. **If you experience problems using eGrants, contact the eGrants Help Desk at (888) 677-7849 or (202) 606-7506, or email at egrantshelp@cns.gov.**

What to Include in Your Continuation Request:

I. Applicant Info

II. Application Info

Update the Applicant Info and Application Info Sections in eGrants if necessary.

III. Narrative (Narratives Section)

Executive Summary: Please provide a one-paragraph summary of your proposed program. This paragraph must be 500 characters maximum, including spaces and punctuation. The Corporation will post these summaries on **www.nationalservice.gov** in the interest of transparency and Open Government.

Your original application will appear in the narrative sections Summary of Accomplishments and Outcomes, Training and Technical Assistance (T&TA) Strategy and Delivery Plan, Organizational Capability, Budget/Cost Effectiveness, Amendment Justification as appropriate. Make changes to these fields as necessary.

IV. Documents

Send updated documents if needed. Submit your planned BPMR form for the upcoming year of the agreement.

V. Budget (Budget Section)

Provide a detailed budget for the upcoming year. Your budget from the previous year's application is copied into your continuation request so you can make the necessary adjustments. Include any carry over funds from the previous year.

ATTACHMENT A: Facesheet Instructions
(eGrants Applicant Info and Application Info Sections)

Modified Standard Form 424 (Rev. 11/02 to conform to the Corporation's eGrants system)

This form is required for applications submitted for federal assistance.

Item #

1. Filled in for your convenience.
2. Self-explanatory.
3. 3. a. and 3. b. are for state use only (if applicable).
4. Item 4. a: Leave blank.
   Item 4. b: If you are a recipient in year 2 or 3 of an already-awarded grant, enter the grant number, otherwise, leave blank.
5. Enter the following information:
   a. The complete name of the organization that will be legally responsible for the grant, not the name of the organizational unit within the legally responsible organization. (For example, indicate "National University" instead of "Liberal Arts Department.")
   b. Your organization's DUNS number (received from Dun and Bradstreet). **This is a required field. Please see the Notice for instructions on how to obtain a DUNS number.**
   c. The name of the primary organizational unit that will undertake the assistance activity, if different from 5. a.
   d. Your organization's complete address with the 9 digit ZIP+ 4 code.
   e. The name and contact information of the project director or other person to contact on matters related to this application.
6. Enter your Employer Identification Number (EIN) as assigned by the Internal Revenue Service.
7. Item 7. a.: Enter the appropriate letter in the box.
   Item 7. b.: Please enter the characteristic(s) that best describe your organization.

K-12 Education

1 School (K-12)
2 Local Education Agency
3 State Education Agency

Higher Education

4 Vocational/Technical College
5 Community College
6 2-year College
7 4-year College
8 Hispanic Serving College or University
9 Historically Black College or University
10 Tribally Controlled College or University

Non-Profit Organizations

11 Community-Based Organization
12 Faith-Based Organization
13 Chamber of Commerce/ Business Association
14 Community Action Agency/ Program
15 Service/Civic Organization
16 Volunteer Management Organization
17 Self-Incorporated Senior Corps Project
18 Statewide Association
19 National Non-Profit (Multistate)
20 Local Affiliate of National Organization
21 Tribal Organization (Non-government)
22 Other Native American Organization

Government

23 Local Government-Municipal
24 Health Department
25 Law Enforcement Agency
26 Governor's Office
27 State Commission/Alternative Administrative Entity
28 Other State Government
29 Tribal Government Entity
30 Area Agency on Aging
31 U.S. Territory

8. Check the appropriate box for type of application and enter the appropriate letter(s) in the lower boxes:

- Check "New" if your organization has never received a Corporation for National and Community Service grant before.
- Check "New Application/Previous Grantee" if your organization has held an CNCS grant in the past and this application is for a new grant.
- Check "Continuation" if you are a grantee applying for an additional year of funding within an existing multi-year grant project period. AmeriCorps State and National grants are typically awarded for three-year periods.

9. Filled in for your convenience.

10. Use the following list of CFDA (Catalog of Federal Domestic Assistance) numbers for the applicable program listing, or other source if so instructed in the *Notice*: 94.009 Training and Technical Assistance.

11. Enter the project title.
    a. When applying for a "Continuation" or "Amendment" applicants should use the same title as used for their existing grant program. When applying as a "New Applicant/Previous Grantee" if the application is for re-funding of a previous grant program, use the same title as was used in the prior grant program if appropriate (i.e., if the program is unchanged).
    b. Enter the name of the Corporation's program initiative, if any, as provided in the instructions corresponding to the *Notice* for which you are applying; otherwise, leave blank.

12. List only the largest political entities affected (e.g., counties, and cities).

13. (See item 8) "New" application or "New application/previous grantee:" Enter the dates for the proposed three-year project period. "Continuation" or "Amendment" application: Enter the dates of the approved three-year project period.

    Performance Period: this appears only in eGrants, and is for the use of staff only.

14. Leave blank, staff use only.

15. Estimated Funding. Check the appropriate box to indicate the grant year for which funding is being requested. Enter the amount requested or to be contributed <u>during this budget period</u> on each appropriate line, as shown below. The value of in-kind contributions should be included in these amounts, as applicable. For revisions (See item 8), if the action will result in a dollar change to an existing award, include <u>only</u> the amount of the change. For decreases, enclose the amounts in parentheses.

a. Federal	The total amount of federal funds being requested in the budget.
b. Applicant	The total amount of the applicant share as entered in the budget.
c. State	The amount of the applicant share that is coming from state sources.
d. Local	The amount of the applicant share that is coming from local governmental sources (e.g., city, county and other municipal sources).
e. Other	The amount of the applicant share that is coming from non-governmental sources.
f. Program Income	The amount of the applicant share that is coming from income generated by programmatic activities (i.e., use of the additive option where program income is used to increase the size of the program).
g. Total	The applicant's estimate of the total funding amount for the agreement.

16. Pre-filled for your convenience. This program is excluded from coverage by State Executive Order 12372.

17. Check the appropriate box. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit allowances, loans, and taxes. If Yes, attach an explanation.

18. The person who signs this form must be the applicant's authorized representative. A copy of the governing body's authorization for this official representative to sign must be on file in the applicant's office.

Note: Falsification or concealment of a material fact or submission of false, fictitious or fraudulent statements or representations to any department or agency of the United States Government may result in a fine of not more than $10,000 or imprisonment for not more than five (5) years, or both. (18 U.S. Code Section 1001

APPLICATION FOR FEDERAL ASSISTANCE

Standard Form 424 (Rev. 2-2007) Prescribed by OMB Circular A-102

1. TYPE OF SUBMISSION:
☒ Application ☒ Non-Construction

2. a. DATE SUBMITTED: 2. b. APPLICATION IDENTIFIER:	**3. a. DATE RECEIVED BY STATE:**	3. b. STATE APPLICATION IDENTIFIER:
	4. a. DATE RECEIVED BY FEDERAL AGENCY:	4. b. FEDERAL IDENTIFIER: (Staff Only)

5. APPLICANT INFORMATION

5. a. LEGAL NAME:
5. b. ORGANIZATIONAL DUNS:
5. c. ORGANIZATIONAL UNIT (DEPARTMENT/DIVISION):
5. d. ADDRESS *(give street address, city, county, state and zip code)*:
STREET:
CITY: COUNTY:
STATE: COUNTRY:

5. e. NAME AND TELEPHONE NUMBER OF PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION *(give area code)*:

NAME:
TELEPHONE NUMBER: ( ) -
FAX NUMBER: ( ) - EMAIL:

6. EMPLOYER IDENTIFICATION NUMBER *(EIN)*:

7. a. TYPE OF APPLICANT: ***(enter appropriate letter in box)*** ☐

A. State
B. County
C. Municipal
D. Township
E. Interstate
F. Intermunicipal
G. Special District
O. Federal Government
Q. State Education Agency
S. Other (specify)__________
H. Independent School District
I. State Controlled Institution of Higher Learning
J. Private University
K. Indian Tribe
L. Individual
M. Profit Organization
N. Private Non-Profit Organization
P. HQ Internal Organizations
R. Territory

7. b. CNCS APPLICANT CHARACTERISTICS *Enter appropriate codes:*

8. TYPE OF APPLICATION

☐ NEW ☐ NEW/PREVIOUS GRANTEE
☐ CONTINUATION ☐ REVISION

If Revision, enter appropriate letter(s) in box(es):

A. AUGMENTATION B. BUDGET REVISION:
C. NO COST EXTENSION to _____ *(enter date)*
E. OTHER *(specify below)*

9. NAME OF FEDERAL AGENCY:
Corporation for National and Community Service

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

11. a. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

12. AREAS AFFECTED BY PROJECT *(List Cities, Counties, States, etc.)*:

11.b. CNCS PROGRAM INITIATIVE (IF ANY):

13. PROPOSED PROJECT: START DATE: ENDING DATE:

14. Performance Period (Staff Use Only_

15. ESTIMATED FUNDING: Check applicable box: Yr 1: ☐ Yr.2: ☐ Yr. 3: ☐

a. FEDERAL	$
b. APPLICANT	$
c. STATE	$
d. LOCAL	$
e. OTHER	$
f. PROGRAM INCOME	$
g. TOTAL	$

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESSS FOR REVIEW ON:
DATE __________

b. NO. ☒ PROGRAM IS NOT COVERED BY E.O. 12372

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?
☐ YES If "Yes," attach an explanation. ☐ NO

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.

a. TYPED NAME OF AUTHORIZED REPRESENTATIVE:	b. TITLE:	c. TELEPHONE NUMBER:
d. SIGNATURE OF AUTHORIZED REPRESENTATIVE:		e. DATE SIGNED:

Attachment B: Assurances and Certifications (eGrants Review, Authorize and Submit Section)

: Assurances and Certifications (eGrants Review, Authorize and Submit Section)

Instructions

By signing and submitting this application, as the duly authorized representative of the applicant, you certify that the applicant will comply with the Assurances and Certifications described below.

a) **Inability to certify**
Your inability to provide the assurances and certifications listed below will not necessarily result in denial of a grant. You must submit an explanation of why you cannot do so. We will consider your explanation in determining whether to enter into this transaction. However, your failure to furnish an explanation will disqualify your application.

b) **Erroneous certification or assurance**
The assurances and certifications are material representations of fact upon which we rely in determining whether to enter into this transaction. If we later determine that you knowingly submitted an erroneous certification or assurance, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

c) **Notice of error in certification or assurance**
You must provide immediate written notice to us if at any time you learn that a certification or assurance was erroneous when submitted or has become erroneous because of changed circumstances.

d) **Definitions**
The terms "covered transaction", "debarred", "suspended", "ineligible", "lower tier covered transaction", "participant", "person", "primary covered transaction", "principal", "proposal", and "voluntarily excluded" as used in this document, have the meanings set out in 2 C.F.R. Part 180, sub part I, "Definitions." A transaction shall be considered a "covered transaction" under any award resulting from this application if it meets the definition in 2 C.F.R part 180, subpart B, "covered transactions."

e) **Assurance requirement for subgrant agreements**
You agree by submitting this proposal that if we approve your application you shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by us.

f) **Assurance inclusion in subgrant agreements**
You agree by submitting this proposal that you will obtain an assurance from prospective participants in all lower tier covered transactions and in all solicitations for lower tier covered transactions that the participants are not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction.

g) **Assurance of subgrant principals**
You may rely upon an assurance of a prospective participant in a lower-tier covered transaction that is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless you know that the assurance is erroneous. You may decide the method and frequency by which you determine the eligibility of your principals. You may, but are not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

h) **Non-assurance in subgrant agreements**
If you knowingly enter into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the federal government, we may terminate this transaction for cause or default.

i) **Prudent person standard**
Nothing contained in the aforementioned may be construed to require establishment of a system of records in order to render in good faith the assurances and certifications required. Your knowledge and information is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.

ASSURANCES

As the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that the applicant:

- Has the legal authority to apply for federal assistance, and the institutional, managerial, and financial capability (including funds sufficient to pay the non-federal share of project costs) to ensure proper planning, management, and completion of the project described in this application.
- Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- Will establish safeguards to prohibit employees from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 CFR 900, Subpart F).
- Will comply with all federal statutes relating to nondiscrimination. These include but are not limited to: Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color, or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683, and 1685-1686). which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. 794), which prohibits discrimination on the basis of disability (d) The Age Discrimination Act of 1975, as amended (42 U.S.C. 6101-6107), which prohibits discrimination on the basis of age; (e) The Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290dd-3 and 290ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the National and Community Service Act of 1990, as amended; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
- Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of federal participation in purchases.
- Will comply with the provisions of the Hatch Act (5 U.S.C. 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C 276a and 276a-77), the Copeland Act (40 U.S.C 276c and 18 U.S.C. 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. 327-333), regarding labor standards for Federally assisted construction sub-agreements.
- Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires the recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is $10,000 or more.
- Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved state management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C 1451 et seq.); (f) conformity of federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16U.S.C. 469a-l et seq.).
- Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
- Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
- Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984, as amended, and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations.
- Will comply with all of the requirements of Subpart C of 2 CFR Parts 180 and 2200, implementing E.O. 12549, regarding rrestrictions on doing business with suspended, debarred or otherwise disqualified entities.
- Will comply with all requirements for providing a drug-free workplace on a continuing basis as set out in 2CFR Part 182, subpart B, and 2 CFR Part 2245, subpart B, implementing sections 5151-5160 of the Druf-Free Workplace Act of 1988 (P.L. 100-690)
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, application guidelines, and policies governing this program.

CERTIFICATION

Certification - Lobbying Activities
As required by Section 1352, Title 31 of the U.S. Code, as the duly authorized representative of the applicant, I certify, to the best of my knowledge and belief, that:

- No federal appropriated funds have been paid or will be paid, by or on behalf of the applicant, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer of Congress in connection with the awarding of any federal contract, the making of any federal loan, the entering into of any cooperative agreement, or modification of any federal contract, grant, loan, or cooperative agreement;
- If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the applicant will submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;
- The applicant will require that the language of this certification be included in the award documents for all subcontracts at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients will certify and disclose accordingly.

Assurances and Certification

ASSURANCE SIGNATURE: **NOTE: Sign this form and include in the application.**

SIGNATURE: By signing this assurances page, you certify that you agree to perform all actions and support all intentions in the Assurances section.

Organization Name: ______________________

Program Name: ______________________

Name and Title of Authorized Representative: ______________________

Signature: ______________________

Date: ______________________

CERTIFICATION SIGNATURE: **NOTE: Sign this form and include in the application.**

Before you start: Before completing certification, please read the Certification Instructions.

SIGNATURE: By signing this Certification page, you certify that you agree to perform all actions and support all intentions in the Certification sections of this application. The Certification is:
Lobbying Activities

Legal Applicant: ______________________

Program Name: ______________________

Name and Title of Authorized Representative: ______________________

Signature: ______________________

Date: ______________________

ATTACHMENT C: Budget Worksheet (eGrants Budget Section)

Section I. Program Operating Costs

A. Personnel Expenses

Position/Title/Description	Qty	Annual Salary	% Time	**Total Amount**	**CNCS Share**	**Grantee Share**
			Totals			

B. Personnel Fringe Benefits

Purpose/Description	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

C.1. Staff Travel

Purpose	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

D. Equipment

Item/ Purpose/Justification	Qty	Unit Cost	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

E. Supplies

Purpose	Calculation	**Total Amount**	**CNCS Share**	**Grantee Share**
	Totals			

F. Contractual and Consultant Services

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**
		Totals			

I. Other Program Operating Costs

Purpose	Calculation	Daily Rate	**Total Amount**	**CNCS Share**	**Grantee Share**

	Totals			

Subtotal Section I:	Total Amount	CNCS Share	Grantee Share

Source of Match

Source(s), Type, Amount, Intended Purpose				
	Private	State and/or Local	Federal	Sources
In-kind	$	$	$	
Cash	$	$	$	
Total	$	$	$	

Section III. Administrative/Indirect Costs

A. Corporation-fixed Percentage Rate

Purpose	Calculation	Total Amount	CNCS Share	Grantee Share
	Totals			

B. Federally Approved Indirect Cost Rate

Cost Type	Cost Basis	Calculation	Rate	Rate Claimed	Total Amount	CNCS Share	Grantee Share

Total Sections I + III:	Total Amount	CNCS Share	Grantee Share

Budget Total: Validate this budget Required Match Percentages:	Total Amount	CNCS Share	Grantee Share

ATTACHMENT D: Budget Checklist

Below is a checklist to help you make certain that you submit an accurate budget narrative that meets AmeriCorps requirements.

In Compliance?	Section I. Program Operating Costs
Yes __ No __	Costs charged under the Personnel line item directly relate to the operation of the AmeriCorps project? Examples include costs for staff that recruit, train, place, or supervise members as well as manage the project.
Yes __ No __	Staff indirectly involved in the management or operation of the applicant organization is funded through the administrative cost section (Section III.) of the budget? Examples of administrative costs include central management and support functions.
Yes __ No __	Staff fundraising expenses are not charged to the grant? You may not charge AmeriCorps staff members' time and related expenses for fundraising to the federal or grantee share of the grant. Expenses incurred to raise funds must be paid out of the funds raised. Development officers and fundraising staff are not allowable expenses.
Yes __ No __	All positions in the budget are fully described in the narrative?
Yes __ No __	The types of fringe benefits to be covered and the costs of benefit(s) for each staff position are described? Allowable fringe benefits typically include FICA, Worker's Compensation, Retirement, SUTA, Health and Life Insurance, IRA, and 401K. You may provide a calculation for total benefits as a percentage of the salaries to which they apply or list each benefit as a separate item. If the fringe amount is over 30%, please list separately. Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item?
Yes __ No __	Holidays, leave, and other similar vacation benefits are not included in the fringe benefit rates but are absorbed into the personnel expenses (salary) budget line item?
Yes __ No __	The purpose for all staff travel is clearly identified?
Yes __ No __	You have budgeted funds for staff travel to CNCS sponsored meetings in the budget narrative under Staff Travel?
Yes __ No __	Funds for the purchase of equipment (does not include general use office equipment) are limited to 10% of the total grant amount?
Yes __ No __	All single equipment items over $5000 per unit are specifically listed?
Yes __ No __	Justification/explanation of equipment items is included in the budget narrative?
Yes __ No __	All single supply items over $1000 per unit are specifically listed?
Yes __ No __	Are all consultant services budgeted below the maximum federal daily rate of $750/day? Is the daily rate noted in all sections of the budget narrative where consultants are proposed?
Yes __ No __	Are all items in the budget narrative itemized and the purpose of the funds justified?

In Compliance?	Section III. Administrative/Indirect Costs
Yes __ No __	Applicant has chosen Option A – Corporation-fixed percentage method and the maximum federal share of administrative costs does not exceed 5% of the total federal funds budgeted? To determine the federal administrative share, multiply all other budgeted federal funds by .0526.
Yes __ No __	Applicant has chosen Option A – Corporation fixed percentage method and the maximum grantee share is at 10% or less of total budgeted funds?
Yes __ No __	Applicant has chosen Option B – federally approved indirect cost rate method and documentation submitted to CNCS if multi-state, state or territory without commission or Indian Tribe applicant? Administrative costs budgeted include the following: (1) indirect costs such as legal staff, central management and support functions; (2) costs for financial, accounting, audit, internal evaluations, and contracting functions; (3) costs for insurance that protects the entity that operates the project;

	and (4) the portion of the salaries and benefits of the director and any other project administrative staff not attributable to the time spent in direct support of a specific project.
Yes __ No __	Applicant has chosen Option B – The maximum grantee share does not exceed the federally approved rate, less the 5% CNCS share?

In Compliance?	**Match**
Yes __ No __	Is the overall match being met at the required level, based on the year of funding?
Yes __ No __	For all matching funds, the source(s) [private, state and local, and federal], the type of contribution (cash or in-kind), and the amount (or an estimate) of match, are clearly identified in the narrative and in the Source of Match fields in eGrants?

ATTACHMENT E: SURVEY ON ENSURING EQUAL OPPORTUNITY FOR APPLICANTS

Corporation for NATIONAL & COMMUNITY SERVICE

OMB NO. 1894-0010 EXP 5/31/2012

Purpose: The Federal government is committed to ensuring that all qualified applicants, small or large, non-religious or faith-based, have an equal opportunity to compete for Federal funding. In order for us to better understand the population of applicants for Federal funds, we are asking nonprofit private organizations (not including private universities) to fill out this survey.

Upon receipt, the survey will be separated from the application. Information provided on the survey will not be considered in any way in making funding decisions and will not be included in the Federal grants database. While your help in this data collection process is greatly appreciated, completion of this survey is voluntary.

Instructions for Submitting the Survey: If you are applying using a hard copy application, please place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. If you are applying electronically, please submit this survey along with your application.

Applicant's (Organization) Name:

Applicant's DUNS Number:

Federal Program: **CFDA Number:**

1. Has the applicant ever received a grant or contract from the Federal government?

☐ Yes ☐ No

2. Is the applicant a faith-based organization?

☐ Yes ☐ No

3. Is the applicant secular organization?

☐ Yes ☐ No

4. Does the applicant have 501(c) (3) status?

☐ Yes ☐ No

5. Is the applicant a local affiliate of a national organization?

☐ Yes ☐ No

6. How many full-time equivalent employees does the applicant have? *(Check only one box).*

☐ 3 or Fewer ☐ 15-50
☐ 4-5 ☐ 51-100
☐ 6-14 ☐ over 100

7. What is the size of the applicant's annual budget? *(Check only one box.)*

☐ Less Than $150,000
☐ $150,000 - $299,999
☐ $300,000 - $499,999
☐ $500,000 - $999,999
☐ $1,000,000 - $4,999,999
☐ $5,000,000 or more

Survey Instructions on Ensuring Equal Opportunity for Applicant

Provide the applicant's (organization) name and DUNS number and the grant name and CFDA number.

1. Self-explanatory.
2. Self-identify.
3. Self-identify.
4. 501(c) (3) status is a legal designation provided on application to the Internal Revenue Service by eligible organizations. Some grant programs may require nonprofit applicants to have 501(c)(3) status. Other grant programs do not.
5. Self-explanatory.
6. For example, two part-time employees who each work half-time equal one full-time equivalent employee. If the applicant is a local affiliate of a national organization, the responses to survey questions 2 and 3 should reflect the staff and budget size of the local affiliate.
7. Annual budget means the amount of money your organization spends each year on all of its activities.

Paperwork Burden Statement
According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **1894-0010**. The time required to complete this information collection is estimated to average five (5) minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** *Amy Borgstrom*, Corporation for National and Community Service, 1201 New York Avenue, NW, Washington, D.C. 20525.

DRAFT

ATTACHMENT F: Budget and Performance Measurement Reporting Form